



**Kaua'i 2021 Coronavirus Rental and Utility Assistance Program
Recertification of Continued Hardship During COVID-19**

Please return this form to Kaua'i Federal Credit Union.

First Name:	Last Name:		
Address: <small>(residential address only)</small>	City:	State:	Zip Code:
Phone:	Email:		

Please check **only ONE box** which best describes your continued hardship during COVID-19:

- Increased costs/Significant Expenses (healthcare, childcare, equipment for at-home work)
 - Caring for child(ren) due to Covid-19 related restrictions
 - Caring for an ill household member with COVID-19 related illness(es)
 - Being sick and unable to work due to COVID-19, or COVID-19 related illness(es)
 - Recently reduced hours or wages, please include paystubs
 - Unable to secure employment
- In addition to this completed form, we also require:
 - Copies of current income (two recent pay stubs, benefit letters, and/or 2021 tax returns, etc.).
 - An updated Vendor Verification Form from your landlord or property manager.

Applicant Statement: "I/We certify that the information given on this form is true and accurate to the best of my knowledge. I am aware that there are penalties for willfully and knowingly giving false information on an application for Federal or State funds. Penalties for falsifying information may include immediate repayment of all Federal or State funds received and/or prosecution under the law. I understand that the information on this form is subject to verification."

Print Name

Signature (signed or typed)

Date